



## Application for Restricted Use Pesticide Dealer License

Please complete an application for each candidate by typing or printing the requested information and check all boxes that apply. If renewal, enclose any sales reports. Then mail the completed application with a check payable to Treasurer, State of Maine to this address: Board of Pesticides Control, 28 State House Station, Augusta, ME 04333-0028

Please fill in any blanks and correct any information that has changed. Check here if anything has changed ☐

Name	Social Security #	Date of Birth	
Home Telephone	E-mail Address		
Home Address	City	State	Zip Code
Company	Federal ID #		
Company Telephone	E-mail Address		
Business Mailing Address	City	State	Zip Code
Signature of Licensee	Title		

### Employee or Officer in Charge of Dealership Authorized to Receive Summons in Maine

Name	Telephone Number		
Business Mailing Address	City	State	Zip Code

#### Application For:

☐ Initial License \$20.00 fee    ☐ Replacement License \$5.00 fee    ☐ License Renewal \$20.00 fee

### Sales Report Status (Must be completed for all renewals)

☐ No Reportable Sales    ☐ Report is Enclosed    ☐ Report Submitted by \_\_\_\_\_

#### For Board Use Only

Fee Required	Fee Paid		
Check #	Check Date	Check Amount	
Date Tested	Certification Expiration Date		
Sales Rpt	Extend Certification To		
License #	Audit #	Issue Date	Expire Date